FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

FRIENDS OF KAREN TESTERMAN

ADDRESS (number and street) ▼

POST OFFICE BOX 3874

☐ Check if different than previously reported. (ACC)

CONCORD | NH | 03302

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00547828

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT: NH 00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- ☐ Primary (12P)
- ☐ General (12G)
- ☐ Runoff (12R)
- ☐ Convention (12C)
- ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day **POST**-Election Report for the:

- ☐ General (30G)
- ☐ Runoff (30R)
- ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 10 / 01 / 2013 through 12 / 31 / 2013

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Jonathon A. Moseley

Signature of Treasurer: Jonathon A. Moseley Date: 01 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 08/2012)

14020031119

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF KAREN TESTERMAN

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	15960.07	23050.07
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	15960.07	23050.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28239.00	28246.00
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	28239.00	28246.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	2804.07	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	8000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

14020031120

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 12/2003) PAGE 3 / 27

Write or Type Committee Name

FRIENDS OF KAREN TESTERMAN

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	9385.00	13335.00
(ii) Unitemized	5907.00	9037.00
(iii) TOTAL of contributions from individuals ▶	15292.00	22372.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	668.07	668.07
(d) The Candidate	0.00	10.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	15960.07	23050.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	8000.00	8000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	8000.00	8000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	23960.07	31050.07

14020031121

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	28239.00	28246.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	28239.00	28246.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	7083.00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	23960.07
25. SUBTOTAL (add Line 23 and Line 24)	31043.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	28239.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2804.07

14020031122

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
DAVID BEZANSON
Mailing Address 55 RUNNELLS ROAD
City: CONCORD | State: NH | Zip Code: 03303
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 225.00

Date of Receipt: 12 / 28 / 2013
Transaction ID : SA11AI.4531
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 210.00

Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.4325
Amount of Each Receipt this Period: 85.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.4326
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 325.00

TOTAL This Period (last page this line number only) .....

14020031123

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 6 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 290.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4403
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 330.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4404
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 370.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4405
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only) .....

14020031124

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 27
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 410.00

Date of Receipt: 10 / 23 / 2013
Transaction ID : SA11AI.4449
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 450.00

Date of Receipt: 11 / 05 / 2013
Transaction ID : SA11AI.4457
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 490.00

Date of Receipt: 11 / 05 / 2013
Transaction ID : SA11AI.4458
Amount of Each Receipt this Period: 40.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only) .....

14020031125

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 8 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 570.00

Date of Receipt: 11 / 22 / 2013
Transaction ID : SA11AI.4478
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DAN BEZON
Mailing Address 171 KEARSARGE MOUNTAIN RD.
City: ANDOVER | State: NH | Zip Code: 03216
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 650.00

Date of Receipt: 12 / 30 / 2013
Transaction ID : SA11AI.4492
Amount of Each Receipt this Period: 80.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
BRIAN COUTURE
Mailing Address 13337 NW 15TH CT
City: PEMBROKE PINES | State: FL | Zip Code: 33028
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 03 / 2013
Transaction ID : SA11AI.4519
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 660.00

TOTAL This Period (last page this line number only) .....

14020031126

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 27
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
RALPH J. DEMICCO
Mailing Address 255 CHESTER TURNPIKE
City: CANDIA | State: NH | Zip Code: 93034
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: BUSINESS OWNER
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.4358
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
FRANCIE HUNTER
Mailing Address PO BOX 591
City: RYE BEACH | State: NH | Zip Code: 90204
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.4377
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
MARGARET HURVITZ
Mailing Address 169 CAMELOT SHORE DR.
City: FARMINGTON | State: NH | Zip Code: 03835
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 310.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4415
Amount of Each Receipt this Period: 10.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional): 1260.00

TOTAL This Period (last page this line number only):

14020031127

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 10 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
MARGARET HURVITZ
Mailing Address 169 CAMELOT SHORE DR.
City: FARMINGTON | State: NH | Zip Code: 03835
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 360.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4416
Amount of Each Receipt this Period: 50.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
JOHN W KIMBALL Jr.
Mailing Address 24 ISAAC LUCAS CIR
City: DOVER | State: NH | Zip Code: 03820
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 260.00

Date of Receipt: 12 / 30 / 2013
Transaction ID : SA11AI.4494
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
JOHN W KIMBALL Jr.
Mailing Address 24 ISAAC LUCAS CIR
City: DOVER | State: NH | Zip Code: 03820
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 460.00

Date of Receipt: 12 / 30 / 2013
Transaction ID : SA11AI.4495
Amount of Each Receipt this Period: 200.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional): 450.00

TOTAL This Period (last page this line number only):

14020031128

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 11 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
MARY C. MURPHY
Mailing Address 47 HEARTHSIDE CIRCLE
City: BEDFORD | State: NH | Zip Code: 03110
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 11 / 22 / 2013
Transaction ID : SA11AI.4483
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DONALD L ONOFRIO
Mailing Address PO BOX 7041
City: LACONIA | State: NH | Zip Code: 03247
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 11 / 15 / 2013
Transaction ID : SA11AI.4476
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
GREGORY PARKER
Mailing Address 37 THORNTON FERRY RD II
City: AMHERST | State: NH | Zip Code: 93031
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : SA11AI.4543
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional): 2000.00

TOTAL This Period (last page this line number only):

14020031129

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 12 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
RAYMOND B RUDDY
Mailing Address 26 ROLLING LN
City: DOVER | State: MA | Zip Code: 92030
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 23 / 2013
Transaction ID : SA11AI.4451
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
PAULA JONES TARTA
Mailing Address 125 CABLE RD.
City: RYE | State: NH | Zip Code: 93870
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.4398
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
PAULA JONES TARTA
Mailing Address 125 CABLE RD.
City: RYE | State: NH | Zip Code: 93870
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 22 / 2013
Transaction ID : SA11AI.4446
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional): 1500.00

TOTAL This Period (last page this line number only):

14020031130

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 27
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
DONALD S. TERASAKI
Mailing Address 7834 NORTH GATE RD.
City: ROSCOE | State: IL | Zip Code: 61073
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: RETIRED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 350.00

Date of Receipt: 10 / 16 / 2013
Transaction ID : SA11AI.4432
Amount of Each Receipt this Period: 100.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DAVID TESTERMAN
Mailing Address PO BOX 3784
City: NASHUA | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 2600.00

Date of Receipt: 10 / 22 / 2013
Transaction ID : SA11AI.4448
Amount of Each Receipt this Period: 2600.00
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
WILLIAM WICHTERMAN
Mailing Address 10157 PALMER DRIVE
City: OAKTON | State: VA | Zip Code: 22124
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED
Occupation: INFORMATION REQUESTED
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 10 / 2013
Transaction ID : SA11AI.4515
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 2950.00

TOTAL This Period (last page this line number only) 9385.00

14020031131

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 14 OF 27

☐ 11a ☐ 11b ☒ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
SANDRA ZIEHM FOR COMMISSIONER
Mailing Address 14 SPRING ST
City: NASHUA | State: NH | Zip Code: 03247
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 600.00

Date of Receipt: 12 / 13 / 2013
Transaction ID : SA11C.4553
Amount of Each Receipt this Period: 600.00
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only) 600.00

14020031132

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 15 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3010.00

Date of Receipt: 10 / 23 / 2013
Transaction ID : SA13A.4309
Amount of Each Receipt this Period: 3000.00
CANDIDATE LOAN FROM PERSONAL FUNDS

B.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3010.00

Date of Receipt: 11 / 12 / 2013
Transaction ID : SA13A.4315
Amount of Each Receipt this Period: 400.00
CANDIDATE LOAN FROM PERSONAL FUNDS
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3010.00

Date of Receipt: 11 / 14 / 2013
Transaction ID : SA13A.4317
Amount of Each Receipt this Period: 599.85
CANDIDATE LOAN FROM PERSONAL FUNDS
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only) .....

14020031135

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) — PAGE 16 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 8010.00

Date of Receipt: 11 / 15 / 2013
Transaction ID : SA13A.4310
Amount of Each Receipt this Period: 5000.00
CANDIDATE LOAN FROM PERSONAL FUNDS

B.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 8010.00

Date of Receipt: 12 / 12 / 2013
Transaction ID : SA13A.4319
Amount of Each Receipt this Period: 400.00
CANDIDATE LOAN FROM PERSONAL FUNDS
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
KAREN TESTERMAN
Mailing Address PO BOX 3874
City: CONCORD | State: NH | Zip Code: 03302
FEC ID number of contributing federal political committee: C S4NH00104
Name of Employer | Occupation
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 8010.00

Date of Receipt: 12 / 19 / 2013
Transaction ID : SA13A.4321
Amount of Each Receipt this Period: 173.75
CANDIDATE LOAN FROM PERSONAL FUNDS
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 5000.00

TOTAL This Period (last page this line number only) 8000.00

14020031134

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A. Full Name (Last, First, Middle Initial)
DEBORAH HENSEL

Mailing Address PO BOX 3874

City: CONCORD | State: NH | Zip Code: 03302

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 25 / 2013

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.4302

B. Full Name (Last, First, Middle Initial)
DEBORAH HENSEL

Mailing Address PO BOX 3874

City: CONCORD | State: NH | Zip Code: 03302

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2013

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.4304

C. Full Name (Last, First, Middle Initial)
DEBORAH HENSEL

Mailing Address PO BOX 3874

City: CONCORD | State: NH | Zip Code: 03302

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 02 / 2013

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.4305

SUBTOTAL of Disbursements This Page (optional) 10000.00

TOTAL This Period (last page this line number only) .....

14020031135

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 18 OF 27

[X] 17 [ ] 18 [ ] 19a [ ] 19b [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A. Full Name (Last, First, Middle Initial)
MATTHEAU LEDUC

Mailing Address PO BOX 3874

City: DOVER State: NH Zip Code: 03821

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4291

B. Full Name (Last, First, Middle Initial)
MATTHEAU LEDUC

Mailing Address PO BOX 3874

City: DOVER State: NH Zip Code: 03821

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 07 / 2013

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4290

C. Full Name (Last, First, Middle Initial)
MATTHEAU LEDUC

Mailing Address PO BOX 3874

City: DOVER State: NH Zip Code: 03821

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 08 / 2013

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4292

SUBTOTAL of Disbursements This Page (optional) 8000.00

TOTAL This Period (last page this line number only) .....

14020031136

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A. Full Name (Last, First, Middle Initial)
MATTHEAU LEDUC

Mailing Address PO BOX 3874

City: DOVER | State: NH | Zip Code: 03821

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 23 / 2013

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4293

B. Full Name (Last, First, Middle Initial)
MATTHEAU LEDUC

Mailing Address PO BOX 3874

City: DOVER | State: NH | Zip Code: 03821

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 24 / 2013

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4296

C. Full Name (Last, First, Middle Initial)
JONATHAN MEADOWS

Mailing Address PO BOX 3874

City: CONCORD | State: NH | Zip Code: 03302

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4306

SUBTOTAL of Disbursements This Page (optional): 8000.00

TOTAL This Period (last page this line number only):

14020031137

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

- [X] 17
- [ ] 18
- [ ] 19a
- [ ] 19b
- [ ] 20a
- [ ] 20b
- [ ] 20c
- [ ] 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

A.
Full Name (Last, First, Middle Initial)
JONATHAN MEADOWS

Mailing Address PO BOX 3874

City: CONCORD | State: NH | Zip Code: 03302

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 30 / 2013

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4308

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) 2000.00

TOTAL This Period (last page this line number only) 28000.00

14020031138

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4309

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]*
KAREN TESTERMAN

Election: 2014
[X] Primary
[ ] General
[ ] Other (specify) ▼

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 23 / 2013	/ / ON DEMAND	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 3000.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031139

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4315

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
KAREN TESTERMAN

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302 | **[MEMO ITEM]**

Election: 2014
[X] Primary
[ ] General
[ ] Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400.00	0.00	400.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
11 / 12 / 2013	ON DEMAND	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031140

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4317

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
KAREN TESTERMAN

Election: 2014
[X] Primary
[ ] General
[ ] Other (specify) ▼

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302 | **[MEMO ITEM]**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
599.85	0.00	599.85

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 / 14 / 2013	MM / DD / ON DEMAND	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031141

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4310

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
KAREN TESTERMAN

Election: 2014
[X] Primary
[ ] General
[ ] Other (specify) ▼

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
11 / 15 / 2013	ON DEMAND	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	5000.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031142

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4319

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]*
KAREN TESTERMAN

Election: 2014
[X] Primary
[ ] General
[ ] Other (specify) ▼

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302 | [MEMO ITEM]

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400.00	0.00	400.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
12 / 12 / 2013	/ / ON DEMAND	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 0.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031143

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) ☒ 13a ☐ 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF KAREN TESTERMAN

Transaction ID : SC/10.4321

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
KAREN TESTERMAN

Election: 2014
☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address
PO BOX 3874

City: CONCORD | State: NH | ZIP Code: 03302 | **[MEMO ITEM]**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
173.75	0.00	173.75

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
12 / 19 / 2013	ON DEMAND	0.00 % (apr)	☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	0.00
TOTALS This Period (last page in this line only) ▶	8000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020031144

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)

FRIENDS OF KAREN TESTERMAN

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MATTHEAU LEDUC

Mailing Address PO BOX 3874

City DOVER State NH Zip Code 03821

Nature of Debt (Purpose): POLITICAL STRATEGY CONSULTING

Transaction ID : SD10.4178

Outstanding Balance Beginning This Period: 2000.00

Amount Incurred This Period: 0.00

Payment This Period: 2000.00

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶	0.00
2) **TOTALS** This Period (last page this line number only) ▶	0.00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

FEC **Schedule D (Form 3)** (Revised 02/2003)

14020031145

FE5AN018

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS 1-31-14

HAND DELIVERED _____ Date of Receipt

USPS FIRST CLASS MAIL _____ Postmark

USPS REGISTERED/CERTIFIED _____ Postmark

USPS PRIORITY MAIL _____ Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____ Postmark

OVERNIGHT DELIVERY SERVICE: SHIPPING DATE — NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____ ☐

UPS _____ ☐

DHL _____ ☐

AIRBORNE EXPRESS _____ ☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____ Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____ Date of Receipt

OTHER _____ Date of Receipt or Postmark

PREPARER DH DATE PREPARED 1-31-14

14020031146